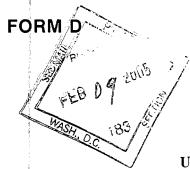
131/15/4



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL					
OMB Number:	3235-0076				
Expires:	May 31, 2005				
Estimated average burden					
hours per respor	nse 16.00				

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
	1				

UNIFORM LIMITED OFFERING EXEMI	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Team Danger Ventures II, LLC - Offering of Membership Interests	
Filing Under (Check box(es) that apply):	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Team Danger Ventures II, LLC	05003961
	Table 1968 And Addison
	Telephone Number (Including Area Code)
12016 Edgestone Road, Dallas, Texas 75230 Address of Principal Business Operations (Number and Street, City, State, Zip Code)	(972) 490-9124 Telephone Number (Including Area Code)
(if different from Executive Offices)	relephone Number (including Area Code)
same	same DOOFERF
Brief Description of Business	LUCESSEL
The issuer is in the business of managing the marketing aspects of websites.	FEB 1 5 2005
Type of Business Organization	1 : 1 Imagendail
	clease specify): Limited Designaty
business trust limited partnership, to be formed	Company
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization:	nated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	₩.
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supply not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	securities Administrator in each state where sales rethe exemption, a fee in the proper amount shall
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unlessition at a federal notice.	

	. BASIC IDENTIFICATION DATA							
2. Enter the information requested for the following:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;								
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer								
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
• Each general and managing partner of partnership issuers.								
		G Division G	Conservation Alon					
Check Box(es) that Apply: Promoter Bene	icial Owner	✓ Director	General and/or Managing Partner					
Full Name (Last name first, if individual) Walz, Douglas E.								
Business or Residence Address (Number and Street, City, 12016 Edgestone Road, Dallas, Texas 75230	State, Zip Code)							
Check Box(es) that Apply Promoter Bene	icial Owner	☑ Director	General and/or Managing Partner					
Full Name (Last name first, if individual)								
Cohen, Matthew S.								
Business or Residence Address (Number and Street, City,	State, Zip Code)							
8500 Remington Avenue, Suite E, Pennsauken, Nev								
Check Box(es) that Apply: Promoter Bene	icial Owner	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City,	State, Zip Code)							
Check Box(es) that Apply Promoter Bene	icial Owner	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City,	State, Zip Code)							
Check Box(es) that Apply: Promoter Bener	icial Owner	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City,	State, Zip Code)							
Cl. I David Andrew D. David D. David			C11/					
Check Box(es) that Apply: Promoter Bene	icial Owner	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City,	State, Zip Code)							
Check Box(es) that Apply: Promoter Benef	icial Owner Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)		- Alaska						
Business or Residence Address (Number and Street, City,	State, Zip Code)							
(Lise blank sheet or	copy and use additional copies of this sh	eet as necessaru)						
(Ose biank sheet, or	cara and and additional sobies of fills sil	, as necessary,						

	B. INFORMATION ABOUT OFFERING												
1.	Here the insure cold on does the insure intended on the insure intended in the control of the co								Yes	No .			
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						X	and a					
2.	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?								_{\$} 1,5	00.00			
	i					P						Yes	No
3.	4		permit join		-							×	
	commis If a pers or state:	sion or sim son to be lis s, list the na	ilar remune ted is an ass	ration for s sociated pe roker or de	solicitation erson or age ealer. If mo	of purchas ent of a brok ore than fiv	ers in conne ker or deale e (5) person	ection with r registered as to be list	sales of sec d with the S ed are asso	curities in t EC and/or	irectly, any he offering. with a state sons of such		
Full N/A	1	Last name	first, if indi	ividual)									
-	اد	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Zip Code)		-				
Nan	ne of As	sociated Bi	oker or De	aler									
State	es in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)								l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)						
Nan	ie of Ass	sociated Br	oker or De	aler									
Stat	1		Listed Has										
	(Check	"All States	s" or check	individual	States)	***************************************	•••••	****************	•••••	•••••			l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	NE NE	IA NV	KS NH	KY NJ	LA. NM	ME NY	MD	MA ND	MI OH	MN	MS OR	MO
	RI	SC	SD	TN	TX	UT	VT	NC VA	WA	WV	OK WI	WY	PA PR
Full	Name (first, if indi										
Rus	iness or	Residence	Address (N	Jumbaran	d Street C	ity State	Zin Coda)					<u> </u>	
ממים	incas UI	Residence	vanniess (1	TOTAL ALI	u 311551, C	ny, siale, i	cip Couc)						
Nan	ne of Ass	sociated Br	oker or Dea	aler				-		•			
Stati	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
~	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GΛ	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, chec this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.	k		
	Type of Security	Aggregate Offering Pric	e	Amount Already Sold
	Debt	© 0.00		§ 0.00
	Equity		_	\$ 0.00
	Common Preferred	. Ψ	_	Ψ
	Convertible Securities (including warrants)	s 0.00		0.00 \$
	Partnership Interests		_	\$ 0.00
	Other (Specify _membership interests)			\$ 0.00
	Total		_	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.	. Ψ	_	Φ
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	е		
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		_	\$_0.00
	Non-accredited Investors			\$_0.00
	Total (for filings under Rule 504 only)	. 0	_	\$_0.00
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities	S		
	sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to th first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	e		
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	0	_	\$_0.00
	Regulation A	0	_	\$_0.00
	Rule 504	0		<u>\$_0.00</u>
	Total	· <u></u>	_	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure in not known, furnish an estimate and check the box to the left of the estimate.	•,		
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		/	\$ 3,000.00
	Accounting Fees	•••••		\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)	******************		\$
	Other Expenses (identify)			\$
	Total		<u></u>	\$_3,000.00

Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Paym Affiliates Oth Salaries and fees			MBER:OF INVESTORS TEXTENSES AND I	ISE OF AKOGREDS	
each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Payments to Officers, Directors, & Payments to Officers, Directors, & Payments to Other Control of the issuer set of the issuer of the issuer of the issuer of the issuer (Parchase, rental or leasing and installation of machinery and equipment		and total expenses furnished in response to Part C -	- Question 4.a. This difference is the "adjus	ted gross	\$_57,000.00
Officers, Directors, & Paym Affiliates Oth Salaries and fees Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment Construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify): Solution So	5.	each of the purposes shown. If the amount for a check the box to the left of the estimate. The total	any purpose is not known, furnish an estir of the payments listed must equal the adjust	nate and	
Purchase of real estate				Officers, Directors, &	Payments to Others
Purchase, rental or leasing and installation of machinery and equipment	1	Salaries and fees			\$
and equipment		Purchase of real estate		\$	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify): Solution So				\$	
offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify): \$ 0.00		Construction or leasing of plant buildings and fa	acilities		_ 🗆 \$
Working capital		offering that may be used in exchange for the as	sets or securities of another	\$	_ []\$
Other (specify): S		Repayment of indebtedness			
Other (specify): S		Working capital			\$ 57,000.00
Column Totals					
Column Totals				·	
Total Payments Listed (column totals added) 2D. FEDERAL SIGNATURE. The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the fignature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Pate January 31, 2005 Title of Signer (Print or Type) Title of Signer (Print or Type)				[] \$	
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the figurature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Team Danger Ventures II, LLC Name of Signer (Print or Type) Title of Signer (Print or Type)		Column Totals			\$ 57,000.00
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the figurature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Team Danger Ventures II, LLC Name of Signer (Print or Type) Title of Signer (Print or Type)		Total Payments Listed (column totals added)			7,000.00
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the figurature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Team Danger Ventures II, LLC Name of Signer (Print or Type) Title of Signer (Print or Type)			D. FEDERAL SIGNATURE		
Team Danger Ventures II, LLC Name of Signer (Print or Type) Title of Signer (Print or Type) January 31, 2005	sign	ssuer has duly caused this notice to be signed by the ture constitutes an undertaking by the issuer to f	he undersigned duly authorized person. If the units to the U.S. Securities and Exchange	Commission, upon writte	
Team Danger Ventures II, LLC Name of Signer (Print or Type) Title of Signer (Print or Type) January 31, 2005	ssu	r (Print or Type)	Signature	Date	
	Tea	m Danger Ventures II, LLC		January 31, 200	05
Pouglas E. Walz Manager	Nan	e of Signer (Print or Type)	Title of Signer (Print or Type)	>	
To the state of th	oug	las E. Walz	Manager	_	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)